

Federal Correctional Complex Butner, North Carolina



Doctoral Psychology Internship 2015/2016

Member
Association of Psychology Postdoctoral and Internship Centers

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American Psychological Association

This program abides by the APPIC policy that no person at these facilities will solicit, accept, or use any ranking-related information from any internship applicant.

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Introduction

This document describes the internship in clinical psychology offered by the Federal Correctional Complex (FCC) in Butner, North Carolina for the 2015/2016 training year. This is a full-time, one year program. There are five positions in four tracks available for 2015/2016 (Two additional half-time positions are available through the University of North Carolina). This program is accredited as an internship in Professional Psychology by the American Psychological Association and maintains membership in the Association of Psychology Postdoctoral and Internship Centers (APPIC). As will be discussed below, for a number of years FCC Butner has also shared an internship program with the University of North Carolina, which also holds APA accreditation. With this option, two trainees spend equal time at each site. Applications are accepted from students in APA accredited doctoral programs in clinical and counseling psychology who have completed all course work and required practica for a doctoral degree. Application procedures for each option will be addressed in detail below.

Training Model and Goal

The internship component of the Psychology Service strives to meet the training needs of doctoral candidates in applied psychology through supervised experience, didactic programs, and focused scholarship. Our aim is to help doctoral candidates transition from student to practitioner; becoming well-rounded generalists in the clinical applications of psychology, using experiences with correctional populations to facilitate this process. The internship takes a developmental approach such that students' progress toward increased responsibility and autonomy over the year. We view interns as colleagues in training who are valued members of our staff. Our philosophy of training emphasizes creating an environment that simultaneously nurtures and challenges interns, both as professionals and people.

The FCC Butner internship espouses a ***practitioner-scholar*** model which seeks “the productive interaction of theory and practice in a primarily practice-based approach to inquiry” (Hoshmand and Polinghorne, 1992). As an internship, the primary mode of education is experiential, yet supported by didactic programs, modeling, supervision, and inquiry relevant to clinical work. The goal is to develop critical thinking, conceptualization, research, problem-solving, and other scientific skills that are particularly pertinent to clinical practice. All interns receive exposure to empirically validated treatments and empirically-based methods of assessment. While the program is informed by the practitioner-scholar model, many of our interns come from scientist-practitioner graduate programs and we believe our program is consistent with the long-term goals of scientist-practitioner training.

The goals of the internship program derive simultaneously from the mission of the agency and from values of the professional psychological community. Both the training program and the service as a whole are guided by the philosophy that clinical practice

within a correctional setting requires the same core clinical skills and knowledge base as professional practice generally, but takes place within a complex legal, political, and social context. Thus, the goal of the program is to train entry-level professional psychologists who can also function competently in a correctional environment

Generalist Training - At the most fundamental level the main goal of any internship is to provide broad and general preparation for entry into the professional practice of psychology. The internship experience is the capstone to a foundation of knowledge, skills, and attitudes acquired through graduate training. Interns are selected based on appropriate preparation for more intensive, primarily applied work in the core areas of assessment, intervention, consultation, ethics, cultural sensitivity, scholarship, and management/administration. The program emphasizes the applicability of training to a wide variety of client populations and settings.

Four interrelated aims can be identified that support our program goal:

Acquisition of Knowledge Specific to Correctional and Psycholegal Practice - Realistically, most Interns seek a position in a setting that matches some important interest in addition to providing good general training. This internship strives to impart a core knowledge base regarding the law, public policy, and social factors as they relate to the practice of psychology, particularly in a correctional environment. Though development of specific expertise as a correctional or forensic psychologist requires additional training and experience after the internship year, the program serves as a foundation for such specialization.

Development of Professional Autonomy - Consistent with the role of internship as a transition from student to practitioner, the program emphasizes development of attitudes and values consistent with entry into the profession. Interns are offered and should accept a significant degree of autonomy. Trainees are recognized as full participants in the business of the department, such that they receive experience that will prepare them to lead other professionals at the appropriate time in their own careers. Supervisory staff recognize that Interns are "colleagues in training," a reality borne out by the presence of many supervisors who themselves trained at a Bureau facility.

Integration of Science and Practice - Interns have received extensive training in the empirical and theoretical bases of applied psychological methods. In this setting, psychologists are often called to account for the methods and procedures they employ. Staff model the value of remaining current in empirical, theoretical, and scientific knowledge relevant to this setting. In the provision of information and training to varied groups such as other Bureau of Prisons staff, probation officials, attorneys, judges, and in courtroom testimony, our staff, including Interns, are called upon to represent accurately the current science and practice of psychology.

Service to Diverse and Under-served Clients - While many trainees may later choose to practice in non-correctional settings, the program strives to develop an appreciation for the provision of service to client populations that exhibit diversity in presenting complaints, age, ethnicity, linguistic preference, socioeconomic background, and education, to name a few areas of variability. As our clients come from all over the United States and the territories, and from all walks of life, staff of necessity confront an extraordinary range of client circumstances. In addition, psychologists in this setting provide services to groups that are traditionally under-served, such as individuals from financially impoverished urban areas and rural backgrounds.

Though it may seem tautological, the first priority of the training program is training. While our institutions derive clear benefits from the work of interns, training activities are chosen for their value for learning rather than material benefit to the agency. Interns are not expected to perform tasks that are not regular duties of the permanent staff. To the contrary, our goal is to fully prepare interns to assume such roles in this agency or other professional positions upon completion of the program.

Mission and Philosophy

The Bureau of Prisons is the largest division of the United States Department of Justice, with over 34,000 employees. Organized in 1930 under the direction of Assistant Attorney General Mabel Walker Willebrandt, the BOP differs from other federal organizations in that political appointments have not been significant in the agency's development. Following the appointment of Sanford Bates in 1930, the remaining five of the Bureau's Directors have been career employees of the agency. A past Director, Kathleen Hawk-Sawyer, Ed.D., began her career as a Psychology Intern at FCI Morgantown, West Virginia. Psychologists are the primary providers of mental health services in the Bureau, with about 450 doctoral-level staff throughout the country. The agency has been able to offer career appointments to many graduating interns and there are opportunities for rapid advancement. Roughly half of the agency's psychology staff completed one of the Bureau's internship programs. Career opportunities are discussed in greater detail below.

The mission of the Federal Bureau of Prisons is "**to protect society by confining offenders in the controlled environments of prison and community-based facilities that are safe, humane, cost efficient, and appropriately secure, and that provide work and other self-improvement opportunities to assist offenders in becoming law-abiding citizens.**" Psychology programs, particularly at the Butner facilities, are among the most important of the self-improvement and re-entry opportunities available to inmates. The Bureau, like any other organization, has a set of core values and shared attitudes that guide staff actions. These core values are reflected in the implementation of our programs, including the internship.

The Bureau recognizes and facilitates the integral role of the community in

accomplishing its mission, and works cooperatively with the courts, law enforcement agencies, and other components of government, as well as the public at large. The internship program actively seeks community involvement through many avenues, including utilization of training opportunities at local institutions, membership of the staff in local and national organizations, outreach programs to offer specialized training to other professionals and trainees, and participation in local volunteer organizations.

The Setting

Despite (or perhaps because of) movie and television depictions, the public often have little accurate information about life as a resident or employee of a modern prison. It is not surprising then, that many students may have questions about what it is like to work in a prison environment. Beyond these basic concerns, our facilities are clearly different from most other correctional settings and while being unique, do not reflect the day to day professional life in most other Bureau of Prisons facilities. To fully appreciate the Butner milieu, a visit to the Complex is required. However, a brief historical overview may shed some light on the quality of this experience.

The Butner site was originally slated to house a facility with a unique design concept and mission that would distinguish it from other correctional institutions. Conceived in the late 1950's as a model prison psychiatric facility, the formal proposal for the "Eastern Psychiatric Institute for Federal Prisoners" was approved in 1961 and land at the current site was acquired. Over one-million (1960's) dollars were spent in the planning phase alone, and budgetary constraints delayed construction for over a decade. Despite these obstacles and iterative changes in mission and programming, the institution now called FCI Butner was dedicated May 13, 1976, and was immediately dubbed "the most advanced prison facility on earth." Since that time, the institution has been at the forefront of innovative correctional mental health programs. The FCI remains a flagship facility, and is frequently chosen to pilot new programs such as the Sex Offender Commitment and Treatment Program, Drug Abuse, and Step-Down programs described below. The FCI also serves a general population of inmates that includes a range of clinical problems from adjustment disorders to severe mental illness with an overlay of severe personality disorders.



Due to the tremendous resources in this area and the Butner site's history of excellence, the Bureau of Prisons targeted the location for development of one of the first Federal Correctional Complexes. In addition to the FCI, the 770 acre reservation now includes a minimum security Federal Prison Camp (FPC), a Low Security Correctional Institution (LSCI), a JCAHO accredited Federal Medical Center (FMC), and a higher security facility known as FCI-II.



LSCI Butner

The Low Security, Camp, and FCI-II facilities serve general offender populations with appropriate security needs.



FCI-II Butner



FMC Butner

The Federal Medical Center serves the needs of both voluntary and committed mentally disordered offenders, assists the federal court system by providing forensic evaluation services for pretrial and presentence detainees, and delivers a range of inpatient medical care specializing in oncology, diabetes, dialysis services, surgery, and evaluations for organ transplant candidates.

With a diverse mission, the Butner complex provides a wide range of psychological and rehabilitative services to a varied population including numerous special needs offenders, and trains and develops specialized staff for the Bureau of Prisons. Combined, these facilities offer an extraordinary range of internship training experiences.

Given the variety of program areas at the Butner complex, detailed below, and the diverse backgrounds of the various client populations, staff encounters a wide range of cultures and presenting complaints. Currently, there are more seriously mentally ill persons in U.S. prisons and jails than hospitals. Our client populations include extreme forms of psychopathology rarely seen in any other setting.

The client populations are demographically and culturally diverse. At least 40 nationalities are represented at any one time, with the largest number coming from Mexico, various Central and South American nations, West Africa, and Asia. Federal inmates are extremely heterogeneous, ranging from sophisticated white collar criminals from upper class backgrounds to those who have committed violent offenses in territorial jurisdictions of the United States. A significant minority of inmates are politicians, lawyers, physicians, and computer programmers, while others are poorly educated and unskilled.

Visitors generally remark on the openness of the facilities and the relaxed atmosphere evident from staff and inmate behavior, as both contrast sharply with their expectations. The architecture is modern and the facilities are meticulously clean and well-maintained. Despite inevitable pressures to house large inmate populations, common areas and the housing units provide ample public space and remain free of a sense of crowding. While most correctional facilities resist outside scrutiny of their operations, our facilities welcome visitors of varied types, including members of Congress, local high school students, professional staff from neighboring state

institutions, federal judges, defense attorneys, and delegations from other countries interested in correctional reform.

Psychology Programs

The Complex provides a broad spectrum of services to over 4800 adult inmates, including a general correctional population of approximately 3800 men, 300 medical and 300 psychiatric inpatient beds; a 200 bed Residential Drug Abuse Treatment Program, a Commitment and Treatment Program for Sexual Offenders, and 100 individuals in the psychiatric step-down unit. About half of the beds at the FCI-II are earmarked for inmates with Level III medical needs. Psychology Services is crucial to operations in all of these areas. Interns participate in three different service areas appropriate to the emphasis of the track for which they match, as discussed later.

Complex-Wide Programs:

General Population ("G.P." or General Practice) areas, are located at each complex facility and are most representative of the psychology functions in mainstream correctional settings. Inmate clients are served in several ways. New arrivals to the institutions participate in an Admission and Orientation program which includes individual interview, an orientation to available services, and basic drug abuse education. Diagnostic services include clinical evaluation of highly varied mental disorders including the full range of Axis I and II conditions, risk assessments for suicide and danger to others, and treatment program suitability. Treatment services include crisis intervention, short and long-term individual therapy, group psychotherapy, psycho-educational groups, and counseling regarding adjustment and family issues. Psychologists also serve as members of interdisciplinary unit teams and assist in planning programs and reviewing progress of inmates.

Non-Residential Drug Treatment is provided at each Bureau of Prisons facility, including those at the complex. A Drug Education program, while targeted to inmates with significant substance abuse problems, is also open to all interested residents, and is an informational program based upon a biopsychosocial model. Non-residential treatment also includes both preparatory and maintenance treatment in coordination with residential substance abuse treatment, as described below.

Additionally, Care Level Three inmates (chronically mentally ill persons) who can function adequately on an outpatient basis are housed throughout the complex. These inmates receive varying levels of treatment and support from psychology and psychiatry staff. Individual therapy, group therapy, and ancillary treatments (e.g., "Re-entry Group") are provided under the direction of the Care Level 3 Psychologist. As discussed below, many of these inmates participate in the residential Step-Down program, while others are housed in general population.

FCI-I Programs

The Residential Drug Abuse Program was one of three pilot programs instituted as part of the Bureau of Prisons' effort to evaluate diverse treatment orientations in an era of rising prison populations associated with drug use. Under the direction of a psychologist, this residential program involves comprehensive treatment of the convicted offender using an Integrative model that includes strong Cognitive - Behavioral and Relapse Prevention components. Participants proceed through a state of the art, planned treatment program. Implemented as a modified therapeutic community, it emphasizes personal accountability and decision-making, as well as the connection of substance abuse to faulty/criminal patterns of thought and action that affect other areas of participants' lives. Confrontation plays a primary role during the initial orientation phase of treatment; this is followed by a second phase focusing on treatment and change and includes a wide range of interventions; the last phase of the program, transitional care, emphasizes adjusting to being drug free. Those completing the program are subject to required post-release supervision, and aftercare is planned by program staff. Given the high base rate for substance abuse in any population, this training has very wide applicability.

Commitment and Treatment Program for Sexually Dangerous Persons - Following Congress's passage of the Adam Walsh Child Protection and Safety Act of 2006 and the Bureau's implementation of components of the Act, the Sex Offender Treatment Program (SOTP) and Forensic Evaluation Service at FCI Butner have undergone considerable changes in their missions. FCI Butner's SOTP was recently replaced by the Commitment and Treatment Program (CTP) for Sexually Dangerous Persons (i.e., treatment for civilly committed offenders). The Clinical Service component of the CTP is responsible for provision of the psychological treatment of the inmate, implementation of behavior management plans, and coordination of the multidisciplinary treatment team. Treatment is holistic and multidimensional with the ultimate goal of reducing sexual dangerousness and criminal recidivism potential. The Forensic Evaluation Service conducts psychological evaluations and provides documentation pursuant to civil commitment hearings, subsequent progress reviews, and other reports.

Mental Health Step-Down Program - The Mental Health Step-Down Program is a residential treatment program for inmates with severe, persistent mental illness, typically (although not limited to) an Axis I diagnosis of the Schizophrenic type. The goal of the step-down unit is to provide treatment for chronic mental illness that is evidence-based, maximizes functioning, and minimizes relapse and hospitalization. Interns are involved in the clinical management of cases, providing group therapy, and short term individual therapy and crisis intervention. Interns are also involved in teaching psycho-educational modules aimed at cognitive rehabilitation and life skills training. Interns become familiar with medications prescribed to these patients through collaboration with Psychiatry Services as part of an outpatient medication clinic.

Consultation with other departments (e.g., Education, Recreation, Religious Services) is an integral part of the program.

Forensic Evaluation Program - As described above, the FCI-I forensic program staff are tasked with performing detailed “outpatient” pretrial evaluations of criminal defendants at the behest of federal courts from throughout the United States. Evaluations frequently include assessments related to competency to stand trial and mental state at the time of the offense (*sanity*). Interns receive training in forensic evaluation and related services at the FMC Inpatient Forensic Program, as described below.

FMC Programs

The Inpatient Forensic Program at the FMC accepts inmates at the discretion of the federal courts for various pre- and post-trial forensic evaluations (e.g., competency, sanity, violence risk), for voluntary hospitalization for mental health treatment, or subject to federal quasi-criminal commitment. Given the highly charged legal atmosphere, court-ordered evaluations involve intensive psychological evaluation, understanding of legal standards and procedures, and highly refined report-writing. Staff, including interns (with supervision), provide expert testimony in federal courts throughout the United States when called upon to do so. Members of the public may be aware of Butner’s forensic evaluation program by virtue of high publicity cases that attract national attention. In addition to evaluation, the inpatient treatment service involves the same skills as in community psychiatric hospitals, including clinical interviewing, treatment planning, group therapy and education, and supportive, behavioral and insight-oriented individual psychotherapies. Work at the FMC involves extensive collaboration with Psychiatry, Medicine, and allied health professionals.

The Behavioral Medicine program involves working with inmates who present with psychophysiological disorders, psychological factors affecting their physical conditions, and/or physical conditions which have psychological sequelae. Staff serve as consultants when psychological factors are adversely affecting engagement in or compliance with medical care, and work in concert with Health Services staff (physicians, physician assistants, physical therapists, nurses and social workers) to identify, diagnose and treat inmates for whom the interplay of physical and psychological factors is significant. Staff may provide group and individual treatment for psychophysiological disorders, including hypertension, chronic pain, tension and migraine headaches, anxiety disorders, etc., and inmates with terminal or severe diseases, such as cancer, heart disease, and AIDS. Basic biofeedback techniques and hypnosis as pain management techniques may be used with selected patients. Staff also assist in the implementation of the Palliative Care Program for terminally ill patients nearing death.

Training Tracks

FCC interns participate at the FMC and FCI-I, FCI-II, and/or LSCI at various points in the training year. This plan assures exposure to a continuum of psychology services ranging from outpatient services through residential treatment programs to inpatient hospital facilities. The programs for training include: General Population (Cadre and Behavioral Medicine); Inpatient Forensic; Chronic Mental Illness; Residential Drug Abuse; and Commitment and Treatment for Sexual Offenders.



2012-2013 Internship Class

Interns at this site develop the essential skills for a Staff Psychologist in a mainstream correctional facility by completing a minimum of 500 hours of direct experience in a General Practice rotation. These experiences are obtained with general inmate populations at one of the complex facilities under the direct supervision of staff with primary responsibility as unit psychologist. Typical intern duties mirror those of entry-level staff, including completion of intake screenings, group and individual psychotherapy, crisis intervention, suicide risk assessment, and consultation with medical and psychiatric staff and members of unit teams.

Beyond the foundational experiences noted above, interns receive training in one residential treatment program and one inpatient treatment service. Typical experiences in residential programs include group and individual therapy, intake assessments tailored to the program, large therapeutic community group meetings, team-based treatment planning, implementation of a standard program curriculum, and participation in discipline and motivation for program participants. Applied activities in inpatient services include monitoring treatment compliance, collaboration with medical and psychiatric staff, directing paraprofessionals such as nurses and technicians, and completing elaborate psychological evaluation reports for the courts.

Skills practiced in general population areas, unit-based treatment programs, and inpatient settings are not mutually exclusive. Group and individual treatment is offered across the board. Assessment of risk for suicide, and for violent acting out or other threat to security, is of interest with all inmate populations. Interns may assist in facilitating the outpatient psychiatry medication clinic, in addition to gaining experience in medical and psychopharmacology at the FMC. Extensive psychological evaluations take place in each of the residential programs as well as on the inpatient mental health service. Medical patients are found in every inmate group throughout the complex, not just in the inpatient medical units. Practicing pertinent skills in more than one work area reinforces an integrated view of the complex needs of clients and of psychology services in this setting.

Applicants should indicate interest in one or two of the training tracks described below. The specific track for which one matches determines the combination of applied activities, including a full time, six month rotation in the “home” track. Those who match for the Residential Drug Treatment or Chronic Mental Illness (Step-Down) tracks will spend six months of the internship year at the FCI, with time devoted primarily to activities in the relevant program area. Those matching for the Inpatient Forensic track will complete a six month rotation at the FMC, participating in activities appropriate to that track. Those matching for the Correctional Psychology track will complete a six month rotation at the FCI-II. The remaining half-year is spent at one or more of the “other” facilities, where interns spend the equivalent of half time in an activity which complements the training in the home track, and the other half time in General Practice activities as described above. (About one fifth of each intern’s work week is spent on didactic programs, intern meetings, research, etc., regardless of location).

Training Track	1 st Rotation	2 nd Rotation
Inpatient Forensic (2 Positions)	Inpatient Forensic Program: full-time for 6 months	Commitment and Treatment Program: half-time for 6 months. General Population: half-time for 6 months
Chronic Mental Illness/ Step-Down: (1 Position)	CMI Program: full-time for 6 months.	Inpatient Forensic Program: half-time for 6 months. General Population: half-time for 6 months
Residential Drug Abuse (1 Position)	Residential Drug Abuse Program: full-time for 6 months	Inpatient Forensic Program: half-time for 6 months. General Population: half-time for 6 months
Correctional Psychology (1 Position)	Correctional Psychology Program: full-time for 6 months	Chronic Mental Illness Program: half-time for 6 months. Outpatient Forensic Assessment: half-time for 6 months

Supervisory Staff

The Psychology staff at FCC-Butner includes 33 doctoral-level psychologists, most with extensive experience in clinical practice. The majority reflect a Cognitive-Behavioral theoretical orientation. Research interests include suicide prevention, anger and violence, competency restoration, neurological disorders and deviant behavior, and cultural factors in assessment, to name a few. An interest in the social, political, and legal implications of these special interests unifies the staff. Our staff define the field of forensic psychology in a broad sense, to include traditional applications such as providing treatment to offenders or performing court ordered evaluations, but also embracing a host of other professional psychological concerns that relate to any area of the law and to public policy debate. All members of the professional staff are involved in training in some way, and a listing of staff members is attached as an appendix. Several staff hold one or more adjunct appointments in the departments of Psychology, Psychiatry, or Law at the University of North Carolina and/or Duke University. Three staff hold the ABPP Diploma in Forensic Psychology, and one in Clinical Psychology and one in Cognitive Behavioral Psychology. The staff also includes a number of treatment specialists, technicians, and support personnel.

Psychology Services maintains offices in several areas of the complex with a full-time Administrative Assistant or Secretary at each institution. Offices are located in each facility to accommodate interns. All staff and interns have computer workstations on an institutional and agency network with Internet access. Software includes word-processing, database management, test scoring, and customized psychology office management applications. Facilities are available for group therapy, audiotape, and videotape, and for video editing. Professional libraries are located at each institution, and the department maintains a wide variety of standardized testing materials and equipment in each Psychology area. Library privileges may be obtained through the area universities and neighboring institutions as well. Computer-assisted research is facilitated both by on-site staff and by the agency's central office librarians. On-site, on-line access is available to *Lexis/Nexis*, *PsychLIT*, *Sociological Abstracts*, *Criminal Justice Abstracts*, *Dialog*, and *Proquest Direct General Periodicals Research Database*. Our legal staff will assist with access to *WestLaw*, and each facility has a law library including U.S. (Supreme Court), Federal (Courts of Appeal), and Federal Supplement (District Courts) Reporters, Reporters for North Carolina, New York, and California, and topical treatises. Staff also have access to teaching aids through the Employee Services Department, which maintains a large training center with audiovisual equipment and a computer lab centrally located at the Complex. The FMC has a contract medical reference librarian to assist with acquisitions and research.

Psychology Services and the Butner complex overall have training and staff development as key components of their overall mission. In addition to core Psychology staff, trainees have broad exposure to allied disciplines, including Psychiatry, general

Medicine, Nursing, Law, and Social Work, which also carry on active training programs, including an American Academy of Psychiatry and Law accredited fellowship program in Forensic Psychiatry, Public Health Service "Co-Step" programs for Nursing and Physician Assistants, and mental health law exposure for law students. Not surprisingly, the Psychology and Psychiatry training programs collaborate in several ways. A listing of adjunct staff in Psychiatry and Law is attached as an appendix. Psychology Interns benefit from the complex's overall commitment to training and the ready interchange of ideas and experiences with trainees and professionals from other disciplines.

Supervision

Interns are expected to demonstrate a reasonable degree of autonomy and independence, consistent with their transition from student to practitioner. At the same time, trainees should expect sufficient oversight and supervision to ensure that they will benefit maximally from training opportunities and to ensure quality services to clientele. Interns receive at least four hours of supervision per week, with at a minimum of two hours per week of regularly scheduled, individual supervision. Ample opportunity for unscheduled and less formal supervision is also afforded. Interns will also receive a significant amount of group and peer supervision through scheduled group supervision, staff meetings, formal case reviews, intern seminars, and in-house continuing education. FCC/UNC Interns receive a substantial part of their supervision from the UNC Faculty as well.

Interns maintain an ongoing record of the supervision they receive. Written evaluations are prepared quarterly based on feedback from all supervisory staff. These are reviewed with the interns, and the middle and end of the year evaluations are copied to the relevant graduate programs. Interns also complete evaluations of the quality of training and supervision they receive, and this feedback is utilized by the staff to further enhance the program. Upon satisfactory completion of the training year, each intern will receive a certificate of participation, and notification to this effect will be forwarded to the intern's graduate program.

Curriculum and Training Objectives

The curriculum consists of complementary applied and didactic activities to help trainees develop skills associated with doctoral internships, including traditional psychological assessment and intervention techniques. The program is designed to provide generalist training at the doctoral level.

The applied components of the training program focus on traditional competencies for clinical and counseling psychologists, and can be divided into five major content areas: *Assessment, Intervention, Consultation, Scholarship, and Legal/Professional/Ethical Issues*. These content areas correspond to those typically identified by national

conferences and sanctioning agencies as essential to the professional practice of psychology. Interns meet specific objectives in the program areas comprising the relevant track, and each rotation is planned to include a mix of these activities. More details about the applied aspects of the training program are contained in the Internship Handbook presented to trainees at the beginning of the training year.

Didactics

The didactic portion of the curriculum includes two main components. The department offers a weekly Clinical Psychology Seminar for the benefit of both staff and interns from throughout the complex. Staff Psychologists and interns present emerging diagnostic or therapeutic dilemmas for review and feedback from the group, and diagnostic and treatment methods for various conditions or disorders are examined with an emphasis on empirically validated treatments. Interns typically take responsibility for one presentation each, which may be based upon dissertation research or another area of interest that is agreed upon in consultation with a supervisor, or a case presentation of recent clinical work such as psychotherapy or certain types of evaluations. Intern presentations serve to hone valuable skills in presenting to professional audiences and reinforce the importance of scholarship. Staff involvement includes mainly topical presentations of clinical importance, and may serve to relay information obtained through continuing professional education or other sources. Outside presenters are also scheduled as part of this series of seminars. The Psychology Seminar normally meets at either the FCI or in the Complex Training Center. A copy of the schedule of Psychology Seminars for the current training year is attached.

The department also participates in a forensic seminar series for Psychology Interns offered at the FMC, and focusing on professional, ethical, and legal issues. Presentations are normally scheduled on a weekly basis and last approximately one and a half hours, with time available for discussion. Most topics have identified readings from the professional literature. Seminar presentations are offered by Psychology Services staff, adjunct staff from this facility, and scholars and practitioners from the Research Triangle community. The series of presentations explores key areas in professional and ethical issues, criminal and civil law, public policy regarding mental health and mental disabilities, scholarship and research, and forensic and correctional psychology. This program also includes Mock Testimony exercises, with each trainee assuming the role of expert witness. Moot Court is held with our staff attorneys and psychologists serving as judge and attorneys. The forensic seminars also include periodic discussion sessions focusing on Landmark Cases in Mental Health Law. This portion of the program covers an extensive group of case law precedents pivotal in the evolution of mental health policy, including civil and criminal topics, juvenile and family law, civil commitment, right to treatment, informed consent and treatment refusal, disability and workplace discrimination, malpractice, and other areas of interest to clinicians. The specific calendar of seminar presentations will be issued to trainees as they begin the internship. A schedule of topics and presenters for 2013/2014 is

attached.

Additional opportunities are available to participate in the continuing education program for Behavioral Health Division staff, through broadcast training sponsored by the agency central office, as well as numerous presentations and case reviews at area hospitals and universities. The internship program encourages flexible use of other activities such as attendance at various legal proceedings in federal and local courts, preparation of publications, participation in therapy or counseling as an adjunct to training, and numerous other alternatives. The triangle is a hotbed of activity for clinicians, and there are varied colloquia sponsored by local psychological associations, Duke University, North Carolina State University, the University of North Carolina, Central Regional Hospital, and numerous other groups. Interns are encouraged to avail themselves of these opportunities and leave can be granted. The department is occasionally able to provide at least partial funding for intern travel to meetings or workshops. In addition, we sponsor one or more major presentations on site each year, and share an annual learning retreat for interns and supervisors with UNC and Central Regional Hospital.

Two hours of the intern's time each week may be scheduled for research or other scholarly activity. Support for research and related activities can also include consultation by the institution's research department and on-site statistical analysis. Where necessary, access to the resources of the agency's Central Office research staff and the Justice Department's central computing facilities may be obtained. Past interns have completed a dissertation or similar project derived from data and programs at the complex. Applicants should note that empirical research projects using BOP inmates or staff as subjects require formal review and approval by the agency. Anyone planning such a project should initiate review **before** the start of the training year. Interns are often involved in program evaluation projects throughout the complex.

Program Options

The internship program offers two options. FCC Butner offers four full time positions each year, which provide a minimum of 40 hours per week of training activities. This program began with the 1992/93 year and was awarded accreditation effective June 25, 1993. Our most recent accreditation site visit took place in 2008, and our next review is scheduled for 2015. In applying to the FCC program, applicants should clearly indicate in the cover letter interest in one or two (but not more) of the three tracks described above. Please do not rank your selections.

Since 1984 the program has shared with the University of North Carolina School of Medicine Psychology Internship program two joint positions offered through the auspices of UNC. Under this model, trainees spend half their time at FCC-Butner and half at various UNC sites. Training experiences at the FCC are complemented by the diverse opportunities available through UNC, which broaden the trainee's exposure to

more esoteric specialty areas. The Butner and UNC programs maintain their own foci and curriculum planning, and their respective staff strive to help the trainee maximize the benefits of participating in two programs, each with their own integrity and unique orientation. This program has been accredited by APA for a number of years. Further information on the shared program is available via internet at:

<http://www.med.unc.edu/psych/education/psychology-internship> or by writing: Gladys Williams, Ph.D., Director of Psychology Training, Campus Box 6305, University of North Carolina, 27599-6305. (williamg@med.unc.edu). The application procedure (including deadlines) for the FCC/UNC program is described in the UNC brochure on Psychology Internships, available from the above address. Selections are made jointly by the UNC and FCC staff.

Applications and Admissions

Applications are accepted from students in APA Accredited Clinical, Counseling or suitable combined programs in Psychology. In addition to demonstrating excellence in scholarship and professionalism in practice, successful applicants articulate an interest in the domains of correctional and forensic psychology (broadly defined), legal issues in psychological practice, and public policy matters which impact mental health and the management of socially deviant behavior. Prior work experience in a correctional setting is not required, but training and experiences indicative of appropriate interests are important considerations in selections. Applications are evaluated using the following rubric: academic achievement, practical experience, match of interests with the emphases of the program, references and work sample, which is evaluated for writing and critical thinking skills. Due to the competition for these positions, only selected applicants will be offered interviews.

In order to apply you must:

- Be a United States Citizen.
- Be a doctoral degree candidate in an APA accredited professional psychology program.
- Have completed a minimum of 1,000 hours of supervised practical experience (This can include clinical work, supervision, and administrative duties) prior to the ranking deadline.
- Defend your dissertation *proposal* or similar project proposal prior to the ranking deadline.

For the Full Time FCC program applicants must:

- 1) Submit a complete AAPI Online application for Psychology Internship through NMS available on the APPIC website at: <http://www.appic.org>. Be sure to include the following:
 - a) Provide a *Curriculum Vitae* or government application form (OF-612)

- describing all relevant experience.
- b) Provide transcripts of all graduate work.
 - c) Provide letters of recommendation from **THREE** psychologists.
 - d) Submit **ONE** comprehensive assessment report as a work sample.
- Provisions should be made to protect the anonymity of the subject.
- 2) Please clearly specify in the cover letter (preferably in **CAPITAL** lettering) which Track(s) to which you are applying (no more than two). Do not rank order your preferences.
 - 3) All application materials must be received by **November 1, 2014**.

Applications and inquiries should be directed to:

Robert E. Cochrane, Psy.D., ABPP
Federal Medical Center
Old NC Highway 75
Butner, NC 27509-1600

(Email: rcochrane@bop.gov)
(919) 575-3900 x5466
(919) 575-4866 (Fax)

THE BUREAU OF PRISONS IS AN EQUAL OPPORTUNITY EMPLOYER.

We invite application by any and all persons who meet the qualifications noted above and value having a diverse intern group. Selections will be made without discrimination for any non-merit reason such as race, color, religion, national origin, sex, sexual orientation, status as a parent, age, marital status or membership in an employee organization. The Department of Justice provides reasonable accommodations to applicants with disabilities. If you need an accommodation for any part of the application and hiring process, please notify our Human Resource office. The decision on granting reasonable accommodation will be made on a case-by-case basis. Persons with disabilities may be employed in a law enforcement position if they meet the medical and physical requirements for correctional work.

Pursuant to Executive Order 11935, only United States citizens and nationals may compete for civil service jobs. Internship positions are open to individuals of any age. Applicants should be aware that permanent civil service positions with the Bureau of Prisons are open only to those who are not yet 39 years of age at the time they are hired on a permanent basis. This restriction applies to applicants for any career position with the Bureau of Prisons or any other federal law enforcement agency, and has been imposed by the United States Congress through Public Law 100-238. To complete the internship and subsequently apply for permanent employment, a candidate must be younger than 38 at the start of the internship year. (Candidates may be eligible for career appointment through age 44 by joining the Public Health Service Corps.) Please note that intern positions are temporary appointments not to exceed one year. Acceptance into the internship program is not a guarantee of employment thereafter. Interns are considered law enforcement employees, and may be called upon to respond to institution and other emergencies.

Applicants invited for an interview are required to complete additional civil service and other government personnel procedures. Prior to interviews, law enforcement and credit checks will be acquired. Copies for your review may be obtained at the Office of Personnel Management web site (www.opm.gov). **(DO NOT** submit these with your initial application.) Invited applicants will participate in a preemployment interview addressing issues of personal conduct and a panel interview involving a number of scenarios describing situations that could arise in our facilities. This information is used to determine qualification for a position of public trust and is required of all applicants for positions with the Bureau of Prisons. If you have questions about your suitability for a sensitive position in a federal law enforcement agency, you should contact our Employee Services (human resources) staff for clarification.

***** Please note: *****

Because the internship position is classified as "sensitive," candidates must pass a pre-employment medical examination, drug screening, and background investigation. Final acceptance into either program option is contingent on satisfactory completion. As a condition of employment, male applicants born after December 31, 1959, must certify that they have registered with the Selective Service System, or are exempt from having to do so under the Selective Service Law. This position is a drug-testing designated position subject to random testing for illegal drug use. Once selected and enrolled, Interns must adhere to the requirements of the Program Statement (3420.09) titled "Standards for Employee Conduct and Responsibility."

The application deadline for 2015/2016 internship year is November 1, 2014. Your application must be submitted in its entirety via AAPI Online on or before November 1 to be considered. Due to the large number of submissions, candidates are encouraged to complete applications as early in the season as possible. Candidates will be notified by email by December 15, 2014 regarding whether they will be invited for interviews. An on-site, personal interview is required prior to the match process. Invited applicants who cannot travel to FCC-Butner may arrange for a telephone interview in addition to a personal interview at another Bureau of Prisons facility. The interview process is heavily weighted to assess the appropriateness of the applicant's training and career goals to this setting. Following the interview period, any applicants not being considered for acceptance will be notified. This program complies with the policies and computer match procedures, including time lines, adopted by the Association of Psychology Postdoctoral and Internship Centers (APPIC), which are available from the APPIC web site at: <http://www.appic.org>. ***This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.***

Any questions or concerns regarding the accreditation status of the FCC Butner

program may be addressed to:

American Psychological Association
Office of Program Consultation and Accreditation
750 First Street NE
Washington, D.C. 20002-4242
(202) 336-5979

Any complaints regarding the adherence of this program to the policies of the APPIC match process may be referred to :

Chair, APPIC Standards and Review Committee
10 G Street, N.E.
Suite 440
Washington, DC 20002
(202) 589-0600

Benefits

During the 2015/2016 training cycle, the following benefits apply for the full time FCC program:

- A GS-09, Step 1 salary of approximately \$51,030
- Vacation time earned each pay period, equivalent to approximately 13 days per year.
- Sick leave accrued at the same rate as above.
- Paid Federal Holidays.
- Limited authorized leave to attend off-site training.
- Support for research activity.

As temporary employees, interns are not eligible for health insurance or retirement benefits. The stipend afforded is roughly \$20,000 more than the average for the other accredited internships in North Carolina, and matched interns are strongly encouraged to use a part of that resource to maintain COBRA benefits from their existing health insurance policies if possible.

The Area



While some staff choose to live in the town of Butner (population 5000), most, including interns, choose to live in one of the cities comprising *The Research Triangle*. This area, defined by Durham (and Duke University), Chapel Hill (the University of North Carolina), and Raleigh (North Carolina State University), offers a unique combination of southern hospitality, academic stimulation, and cosmopolitan cultural opportunities. In addition to teaching institutions, the intellectual climate is

influenced by the presence of the Research Triangle Park, which includes a number of high tech companies specializing in biotechnology, pharmaceuticals, software development, computers, and robotics, as well as the National Humanities Center and the National Institute for Environmental Health Sciences. It is hardly surprising, then, that the Triangle lays claim to the highest *per capita* proportion of Ph.D.'s and M.D.'s in the country. People come from all over the world to study or work in the Triangle, and the community exhibits remarkable cultural, social, and political diversity. Aside from visiting students and professionals, approximately half of local residents are not originally from North Carolina.



Even the Triangle isn't all business, and as a counterpoint the surrounding areas of the state remain largely rural and scenic, and outdoor activities abound. The climate is temperate but mild, with more than 230 sunshine days each year and an average of seven inches of snow to accentuate the brief winters. Spring and fall temperatures average a perfect 72 degrees, and winter daytime temperatures usually hover around 50. The complex is located in the Carolina Piedmont, which separates the mountains from the coastal plain. *Fortune* magazine has repeatedly recognized the triangle as one of the best areas for business in the U.S., and *Money* magazine surveys consistently rank the Raleigh/Durham/Chapel Hill area among the "Best Places to Live in America." All three Triangle communities offer sophisticated entertainment, including the Broadway at Duke series, a lively jazz scene, the Bull Durham Blues Festival, the American Dance Festival, the Rewind Film Festival, and symphony and chamber orchestra groups. "Tobacco Road" is home to the best in college basketball and soccer, including perennial contenders for NCAA men's and women's basketball championships from both Duke and UNC, and the women's college soccer dynasty at UNC. Raleigh is home to the Carolina Hurricanes, winners of the 2006 Stanley Cup. The Durham Bulls are the AAA affiliate of the Tampa Bay Rays. Local restaurants serve cuisine that spans the globe.

A leisurely afternoon drive to the East leads to the pristine wilderness beaches of the Outer Banks, while the more developed resort beaches near Wilmington and Morehead City/Beaufort are about two hours away. Winter skiing or summer hiking and climbing in the Great Smokies are an easy drive to the west. Water skiing, fishing, canoeing, and kayaking are popular diversions, and there are several recreational lakes close to the facility. Golf, tennis, running, and cycling are also popular activities. Regional metropolitan centers like Charlotte, Washington, and Atlanta are an afternoon's drive.

Career Opportunities

The inmate population of the Bureau of Prisons continues to grow, and with it the need

for Psychologists with specialized training and experience. While we cannot promise career appointments to interns, the agency prefers to hire individuals who have already proven themselves to be skilled practitioners in this environment.

Interns are temporary GS-9 employees. New Ph.D./Psy.D. graduates selected as Staff Psychologists start at the GS-11 Step 1 salary level (currently \$59,749). Successful completion of the first year leads to automatic promotion to GS-12 (\$71,616 to 93,098, depending on length of service). Promotions to GS-13 (\$85,161 to 110,709) and GS-14 (\$100,634 to 130,819) are possible (salaries effective as of January 2014 and typically increase annually). Funds are provided for annual continuing education. Bureau psychologists may also engage in outside employment such as private practice or teaching, after obtaining approval. New staff are given a degree of choice in geographic region and type of prison setting, and if relocation is required the Bureau may pay a substantial portion of the expenses.

Psychologists are the main providers of mental health services in the Bureau and enjoy a great deal of professional autonomy. Due to our continued staff growth, some have the opportunity to become Chiefs after a few years of service. Other career tracks include heading drug abuse or internship programs or taking executive positions as psychology administrators. Agency employees are covered by the Federal Employee Retirement System, a pension plus retirement saving plan. Pre-tax contributions to the Thrift Savings Plan up to 5% of base salary will be matched dollar for dollar by the government. Employees can contribute up to the maximum allowed by the IRS on a pretax basis. Bureau employees may retire after 20 years of service, provided they have reached age 50, or at any age with 25 years of service. The Bureau of Prisons is an equal opportunity employer. However, in accordance with Public Law 100-238, applicants for entry level staff positions must be under the age of 39 at the time of initial appointment.

As an example of intern employment, members of recent graduating classes took positions as: Staff Psychologist - Federal Bureau of Prisons (MDC Brooklyn, FCI Marian, FDC Oklahoma City, FCI-Butner, FCC Terre Haute, FCI Fort Dix), Post-doctoral Forensic Fellow at Patton State Hospital in California, Post-doctoral Fellow at the University of Massachusetts Medical School, Post-doctoral Fellow at the Durham VA in North Carolina, Staff Psychologist at Neuse Correctional Institution in North Carolina, Post-doctoral Forensic Fellow at Central Regional Hospital in NC, and Psychologist at Southern Virginia Mental Health Institute.

Most graduates of the program become active members of APA and Division 41, and related groups appropriate to their sub-specialty interests, such as ATSA or the American Academy of Forensic Psychology. Six former interns have become directors of internship training programs.

Reaching the Institution

Visits may be arranged by contacting the Director of Psychology Training at (919) 575-3900 x5466. **All visitors must bring a photo identification**, such as a driver's license.

Access from Points South (Charlotte, Spartanburg, Atlanta) via Interstate 85:

The Complex is convenient to Interstate 85 just North of Durham. Traveling North on I-85 take **exit 182, "Red Mill Road,"** 4 miles North of the Durham city limit. Turn **West** and continue 3.8 miles until the road dead ends. **Turn right** and travel 0.2 miles before turning **Left on Red Mill Extension**. This ends after 0.5 miles at **Oxford Highway - Turn Right**. The institutions will be on your left - 3.5 miles for the FMC and 4.2 miles for the FCI/LSCI.

From Raleigh-Durham International Airport:

Take I-540 North to Highway US 70. Merge onto Aviation Parkway. Go 2.5 miles and turn left on Globe Road. After 0.5 miles, turn slight right on Page road. Turn left onto US 70. Merge onto I-85 North. Follow directions to the Complex as above.

From the Chapel Hill area:

From Chapel Hill, take **15-501 Northeast**. After crossing over I-40 and entering Durham, exit right at #105A (**15-501 Bypass**). The exit itself then splits - stay left as the road forks, which results in passing over Business 15-501 and heading North (left in relation to the way you were going). After about 3.5 miles, merge onto **I-85 North/70 East**. Stay left to **continue on I-85** when it splits from US 70 and proceed North. Follow directions to the Complex as above.

Access from Points North (Richmond, Washington D.C.) via Interstate 85:

Take **Exit 191 - Butner/Creedmoor**, and turn right at the top of the ramp. After crossing train tracks, take the first right on 33rd Street. Remain on 33rd through several bends in the road until it reaches Oxford Highway (opposite the entrance to Holt Reservoir). Turn **Left on Oxford Highway**. The FCI/LSCI entrance will be about 2.3 miles on your right, followed by the FMC at 3.0 miles.

The following hotels are convenient to the complex from I-85 at **Exit 191** north of Butner:

Ramada Limited on Lyons Station Road - (919) 575-6565 (www.Ramada.com)
Holiday Inn Express - Lyons Station Road - (919) 575-5942 (www.hiexpress.com)
Econo Lodge - Lyons Station Road - (919) 575-6451 (www.choicehotels.com)
Comfort Inn - NC Highway 56 - (919) 528-9296 (www.choicehotels.com)

There are numerous additional hotels along I-85 in Durham.

Appendix A Staff

Jennifer Adams, Ph.D., Staff Psychologist, Federal Correctional Institution.

B.A. (1998) Lenoir-Rhyne College; M.A. (2003) Appalachian State University; Ph.D. (2008) University of North Carolina Greensboro; Internship (2008) Federal Correctional Complex-Butner.

Robert Cochrane, Psy.D., ABPP, Director of Psychology Training/Forensic Psychologist, Federal Medical Center.

B.A. (1992) University of Akron; M.A. (1995) Wheaton College; Psy.D. (1999) Wright State University; Internship (1999) U.S. Medical Center for Federal Prisoners; Forensic Fellowship (2000) University of Massachusetts Medical School. Diplomate in Forensic Psychology, American Board of Professional Psychology. Adjunct Faculty, University of North Carolina-Chapel Hill.

Tanya L. Cunic, Psy.D., Forensic Psychologist Federal Correctional Institution.

B.A. (1993) Washington College; M.S. (1995) South Western Oklahoma State University; Psy.D. (2001) Central Michigan University; Internship (2000) and Post-Doctoral Fellowship (2001) U.S. Medical Center for Federal Prisoners, Springfield, Missouri.

René Daubón, Psy.D., Staff Psychologist, Federal Correctional Institution-II

B.A. (2001), University of Puerto Rico; Psy.D. (2006) Ponce School of Medicine; Internship (2005/06) FCI/FDC Tallahassee.

M. Lela Demby, Ph.D., Staff Psychologist, Sex Offender Treatment Program, Federal Correctional Institution.

B.A. (1988) Princeton University; M.A. (1993) and Ph.D. (2001) University of North Carolina; Internship (1997/1998) University of Medicine and Dentistry of New Jersey/Robert Wood Johnson Medical School; Postdoctoral Fellowship (2002/2003) Federal Medical Center, Butner, North Carolina.

Cynthia Fisher, Psy.D., Drug Abuse Treatment Program Coordinator, Federal Correctional Institution

B.S. (1993) University of Minnesota; Ph.D. (1997) Minnesota School of Professional Psychology; Internship (1996) Federal Correctional Institution, Morgantown, West Virginia.

Freiman-Fox, Ph.D., Outpatient Treatment Coordinator, Federal Correctional Complex

B.A. (1981) Wesleyan University; M.A. (1986) and Ph.D. (1990) University of Kentucky; Internship (1988/89) FMC Lexington and (1989/90) George Washington University Medical Center.

Caroline "Lacy" Frazer, Psy.D., Non-Residential Drug Abuse Coordinator, Federal Correctional Institution.

Psy.D. (1997) Georgia School of Professional Psychology; Internship (1997) Federal Correctional Institution, Petersburg, Virginia.

Dawn J. Graney, Psy.D., Sex Offender Forensic Psychologist, Federal Correctional

- Institution.
B.A. (1994) University of Maryland; M.A. (2000) and Psy.D. (2001), California School of Professional Psychology; Internship (2000/2001) and Forensic Postdoctoral Fellowship (2001/2002), Federal Medical Center, Rochester, Minnesota.
- Jill R. Grant, Psy.D., Forensic Psychologist, Federal Medical Center.
B.A. (1982) and M.A. (1984) Marshall University; Psy.D. (1994) Virginia Consortium in Clinical Psychology; Internship (1993/94) University of North Carolina/FCI Butner.
- Brian C. Gray, Ph.D., Staff Psychologist, Low Security Correctional Institution.
B.A. (1993) Lawrence University; M.A. (2000) and Ph.D. (2006) Florida State University; Internship (2002/2003) University of Wisconsin Counseling Center.
- Brian Grover, Psy.D., Deputy Chief Psychologist - Psychology Treatment Programs, Federal Correctional Complex.
B.A. (1984) Ohio Northern University; Psy.D. (1988) Wright State University, School of Professional Psychology; Internship (1987/88) University of North Carolina/FCI Butner.
- Manuel Gutierrez, Psy.D., Forensic Psychologist, Federal Correctional Institution.
B.S. (1992) James Madison University; M.A. (1996) George Mason University; Psy.D. (2001) Nova Southeastern University; Internship (2000-2001) FCI Petersburg, Virginia.
- Jill Haughawout, Staff Psychologist, Federal Correctional Institution-II.
B.A. (2002) Miami University; M.A. (2004) and Psy.D (2007) Illinois School of Professional Psychology, Argosy University, Schaumburg Campus; Internship (2006) Colorado Department of Corrections; Post Doctoral Fellowship (2007) Illinois Department of Human Services, Treatment and Detention Facility.
- Andres Hernandez, Psy.D., Commitment and Treatment Program Coordinator, Federal Correctional Institution..
B.S. (1988) Colorado State University; Psy.D. (1993) Rutgers University; Internship (1992/93); Post-Doctoral Fellowship (1993/94) Baylor College of Medicine.
- Gary Junker, Ph.D., Chief Psychologist, Federal Correctional Complex.
B.A. (1977) Wright State University; M.A. (1988) University of New Mexico; Ph.D. (1993) Georgia State University; Internship (1992/1993) Federal Correctional Institution - Tallahassee, Florida.
- Edward "Rhett" Landis, Ph.D., ABPP, Deputy Chief Psychologist - Evaluations and Behavioral Health, Federal Correctional Complex.
B.A. (1981), Emory University; M.A. (1985) and Ph.D. (1989) University of Louisville; Internship (1986/87) University of North Carolina/FCI-Butner. Diplomate in Forensic Psychology, American Board of Professional Psychology.
- Melanie Malterer, Ph.D., Sex Offender Program Psychologist, Federal Correctional Institution.
B.A. (1999) and Ph.D. (2008) University of Wisconsin - Madison; Internship (2008/09) Federal Correctional Complex - Butner, North Carolina.
- Robert Melin, Psy.D., Step-Down Program Coordinator, Federal Correctional Institution.

B.S. (1996) Valparaiso University; M.S. (1999) and Psy.D. (2001) Chicago School of Professional Psychology; Internship (2000/2001) and Post-doctoral Fellowship (2001/2002) Florida Department of Corrections.

Rebecca Perkins, Psy.D., Sex Offender Forensic Psychologist, Federal Correctional Institution
B.S. (2000) University of West Florida; M.A. (2003) and Psy.D. (2006) Georgia School of Professional Psychology; Internship (2005/2006) United States Penitentiary, Atlanta; Post-Doctoral Fellowship (2006/2007) Federal Correctional Complex, Butner, North Carolina.

Carlton Pyant, Ph.D., Forensic Psychologist, Federal Medical Center.
B.S. (1981) North Carolina Central University; M.A. (1984) and Ph.D. (1989) Southern Illinois University; Internship (1985/86) William Beaumont Army Medical Center.

Maureen Reardon, Ph.D., Forensic Psychologist, Federal Medical Center.
B.S. (1996) University of Connecticut; M.S. (2000) and Ph.D. (2004) Florida State University; Internship (2003/2004) University of North Carolina/FCC Butner; Postdoctoral Fellowship (2004/2005) Dorothea Dix Hospital.

Justin Rigsbee, Psy.D., Ph.D., Drug Abuse Program Psychologist, Federal Correctional Institution.
B.A. (1999) Florida Atlantic University; M.S. (2002) and Psy.D., Ph.D. (2006) Nova Southeastern University; Internship (2005/2006) Federal Correctional Complex, Butner, NC; Postdoctoral Residency (2006/2007) Nova Southeastern University Criminal Justice Institute.

Heather Ross, Ph.D., Sex Offender Forensic Psychologist, Federal Correctional Institution
B.A. (1994) and M.A. (1997) Hollins College; Ph.D. (2005) Sam Houston State University; Internship (2004) Wyoming State Hospital.

Karen Steinour, Ph.D., Administrator, Commitment and Treatment Program, Federal Correctional Institution.
B.A. (1978) Gettysburg College; M.Ed. (1980) and Ph.D. (1985) Duke University; Internship (1986/87) Walter Reed Army Medical Center.

Adeirdre L. Stribling Riley, Ph.D., Forensic/Behavioral Medicine Psychologist, Federal Medical Center.
B.A. (1996) Trinity College; M.A. (1998) University of Hartford; Ph.D. (2003) University of Tennessee; Internship (2002/03) University of North Carolina/FCI-Butner; Postdoctoral Fellowship (2004-2006) Federal Medical Center, Butner, North Carolina.

Angela Walden Weaver, Ph.D.; Forensic Psychologist, Federal Medical Center.
B.A. (1989) University of Houston; M.A. (1992) and Ph.D. (1995) University of Alabama at Tuscaloosa; Internship (1994/95) University of North Carolina.

Janelle M. Williams, Psy.D., Staff Psychologist, Low Security Correctional Institution
B.A. (2000) University of Richmond; M.A. (2003) and Psy.D. (2007) Nova Southeastern University; Internship (2006/2007) Federal Correctional Complex - Butner, North Carolina

N. Chanell Williams, Ph.D., ABPP; Behavioral Medicine Psychologist, Federal Medical Center.
B.A. (1990) Spelman College; M.A. (1992) and Ph.D. (1996) California School of Professional Psychology (Los Angeles); Internship (1994/95) Tripler Army Medical Center; Postdoctoral Fellowship (1999/2000) Tripler Army Medical Center; Diplomate in Clinical Psychology, American Board of Professional Psychology.

Michael R. Wydo, Psy.D., ABPP, Associate Director of Psychology Training/Habilitation Program Coordinator, Federal Correctional Institution.
B.S.(1992) Penn State University; M.A (1996) Marywood University; Psy.D. (2003) Philadelphia College of Osteopathic Medicine; Internship (2002/2003) University of San Diego (02/03); Postdoctoral Fellowship (2003/2004) Cognitive Therapy Institute of San Diego.

Appendix B
Adjunct Staff

Michael Breedenberg, J.D., Staff Attorney-Advisor, Federal Correctional Complex
B.S. (1990) Pennsylvania State University; J.D. (1993) American University.

Jennifer Dannels, J.D., Staff Attorney-Advisor, Federal Correctional Complex
BS in Psychology in 2000 from Louisiana State University; J.D. (2004) University of Maryland.

Robert Dodson, J.D., Staff Attorney/Special Assistant United States Attorney, Federal Correctional Complex; B.A. (2007) North Carolina State University; J.D. (2010) North Carolina Central University School of Law

Bryon Herbel, M.D., Staff Psychiatrist, Federal Medical Center
B.S. (1982) University of North Dakota; M.D. (1986) University of North Dakota; Residency (1986-90) Karl Menninger School of Psychiatry, Duke University Medical Center, Division of Child and Adolescent Psychiatry (1990-1992).

Christina Kelley, J.D., Staff Attorney-Advisor, Federal Correctional Complex
B.A. (1997) East Carolina University; M.P.A. (1999) North Carolina State University; J.D. (2005) North Carolina Central University School of Law.

Michael Lockridge, J.D., Staff Attorney-Advisor, Federal Correctional Complex
B.S. (1993) Appalachian State University and M.P.A. (1995) Appalachian State University; J.D. (2002) North Carolina Central University School of Law

Robert Lucking, M.D., Staff Psychiatrist, Federal Medical Center
B.A. (1973) Hope College; M.D. (1977) Wayne State University; Residency (1977-1980) Lafayette Clinic and University of Florida.

Thomas D. Owens, M.D., Staff Psychiatrist, Federal Medical Center.
B.A. (1981) University of Colorado/Boulder; M.D. (1985) Louisiana State University School of Medicine/Shreveport; Residency (1985-1989) Duke University Medical Center

Sarah Ralston, M.D., Staff Psychiatrist, Federal Medical Center
B.S. (2002) William and Mary College; M.D. (2006) University of North Carolina; Residency (2010) UNC-Chapel Hill.

Alton Williams, M.D., J.D., Staff Psychiatrist, Federal Medical Center Butner
B.S. (1991) MIT; M.D. (1996) Yale University School of Medicine; J.D. (1999) University of North Carolina; Residency (2000-2003) Massachusetts General Hospital and McLean Hospital; (2003-2004) Harvard Forensic Fellowship.

FEDERAL CORRECTIONAL COMPLEX
BUTNER, NORTH CAROLINA

PSYCHOLOGY SEMINAR SERIES 2014/2015
TUESDAY 10:30 - 11:30

PRESENTER	TITLE/TOPIC	DATE
Michael Wydo, Psy.D., ABPP	Psychology Services: Intake Screenings and SHU Reviews	9-09-14
Jill Haughawout, Psy.D.	Managing Inmates from Intake to Discharge: PDS/ BEMR, Sentry, and ISDS	9-16-14
Robin Watkins, Ph.D.	Suicide Risk Assessments	9-23-14
Cynthia Fisher, Psy.D.	Residential Drug Abuse Treatment	9-30-14
Jennifer Adams, Ph.D.	Evaluations & Report Writing	10-07-14
Clair Collie, Ph.D.	Treating Combat and Military Trauma	10-14-14
Michael Wydo, Psy.D., ABPP	Anger Management	10-21-14
Carlton Pyant, Ph.D.	Maintaining Boundaries in a Correctional Setting	10-28-14

Tracy O'Connor-Pennuto, JD, Ph.D.	Neuropsychological Assessment	11-04-14
Dawn Graney, Psy.D.	Hostage Negotiations	11-11-14
Karen Steinour, Ph.D.	Commitment and Treatment Program (CTP) for Sexually Dangerous Persons	11-18-14
Adeirdre Stribling Riley, Ph.D	Multicultural Assessment and Treatment	11-25-14
Laura Sheras, Psy.D.	Self-Care in a Correctional Environment	12-02-14
Brian Gray, Psy.D.	Gender Dysphoria: Treatment and Evaluations	12-09-14
Andres Hernandez, Psy.D.	Outcome-Based Treatment of Sex Offenders	12-16-14
Kate Freiman-Fox, Ph.D.	Professional Development: Who am I, what am I doing here, and where am I going?	1-06-15
Melanie Malterer, Ph.D.	Group Therapy	1-13-15
Brian Grover, Psy.D.	Social Learning Theory Model of Addiction	1-20-15
Brian Grover, Psy.D.	Marlatt's Relapse Prevention Model	1-27-15
TBA	Psychopharmacological Treatment of Adults	2-03-15

Robin Watkins, Ph.D.	Treatment of PTSD in Prisoners	2-10-15
Jennifer Halbsgut, Psy.D.	Managing Inmate's Medication Non-Compliance	-17-15
N. Chanell Williams, Ph.D., ABPP	Behavioral Medicine: End of Life Issues	2-24-15
Manuel Gutierrez, Psy.D.	Working with HIV+ Patients	3-03-15
Todd Cesar, LCSW	Crisis Support Team	3-10-15
Michael Wydo, Psy.D., ABPP	The Integration of Religion and Spirituality in Rational Emotive and Cognitive Behavioral Therapy	3-17-15
Intern Presentation 1		3-24-15
Gillespie Wadsworth, Psy.D	Dialectal Behavioral Therapy with Prisoners	3-31-15
Intern Presentation 2		4-07-15
Justin Rigsbee, Ph.D.	Dual Diagnosis: Substance Use Disorders in the Severely Mentally Ill	4-14-15
Intern Presentation 3		4-21-15
Robert Melin, Psy.D.	Behavioral Management of Personality Disorders (Duke Unit)	4-28-15

Michael Wydo, Psy.D., ABPP	The Impact of Ethnic and Cultural Identity on Clinical Practice	5-01-15 Retreat Location
Jennifer Adams, Ph.D.	Obtaining Employment in the BOP: USA Jobs	5-05-15
Intern Presentation 4		5-12-15
Andres Hernandez, Psy.D.	Sex Offender Management in Criminal Justice	5-19-15
Intern Presentation 5		5-26-15
Rhett Landis, Ph.D., ABPP	Licensure and Related Credentialing	6-02-15
Intern Presentation 6		6-09-15
Rebecca Barnette, Psy.D.	Sex Offender Risk Assessment	6-16-15
Tanya Cunic, Psy.D	A New Era of STG: The Freeman Movement	6-23-15
Lacy Frazer, Psy.D.	Counseling Gay and Lesbian Clients	6-30-15
Adeirdre Stribling Riley, Ph.D	Psychopathy Checklist (PCL-R): Overview and Scoring	7-14-15

Heather Ross, Ph.D.	Characteristics of Stalkers	7-21-15
Jill Grant, Psy.D.	Body Image Disturbance as it Relates to Psychological and Medical Problems: Assessment and Treatment	7-28-15
Michael Wydo, Psy.D., ABPP	Supervising Clinical Cases	8-04-15

2014-2015 FORENSIC SEMINAR SCHEDULE*
WEDNESDAYS 10-11:30
Federal Correctional Complex and Central Regional Hospital
Butner, NC

DATE	LOCATION	Speaker(s)	SEMINAR TITLE & READINGS
09/10/14	FMC Warden's Conference Rm	Bob Cochrane, Psy.D., ABPP Michael Bredenberg, J.D.	Introduction and Overview: Role and Responsibilities of Practitioners in Forensic setting and <i>Introduction to Legal Research</i> Textbook: <i>Psychological Evaluations for the Courts</i> (Chapters 1 and 2) Title 18, United States Code, Sections 4241-4248.
09/17/14	FCC – Training Center (combined)	Bob Cochrane, Psy.D., ABPP	Competency to Stand Trial Textbook: <i>Psychological Evaluations for the Courts</i> (Chapters 6 and 7) Stafford, K. (2003). Assessment of competence to stand trial. (pp. 359-380). In A. Goldstein (Ed.) <i>Handbook of psychology: Forensic psychology, Vol. 11</i> .
09/24/14	FMC Warden's Conference Rm (combined - trainees only)		Landmark Cases - Criminal Competencies Dusky v. U.S., 362 U.S. 402 (1960) Wilson v. U.S., 391 F. 2d. 460 (D.C. Cir. 1968) Estelle v. Smith, 451 U.S. 454 (1981) Colorado v. Connelly, 479 U.S. 157 (1986) Jackson v. Indiana, 406 US 715 Godinez v. Moran, 113 S.Ct. 2680 (1993) Indiana v. Edwards, 554 U.S. 208 (2008)

DATE	LOCATION	Speaker(s)	SEMINAR TITLE & READINGS
10/01/14	FCC - Training Center (combined)	Rhett Landis, Ph.D., ABPP	Criminal Responsibility and Diminished Capacity <i>Psychological Evaluations for the Courts</i> (Chapter 8). Borum, R. and Fulero, S. (1999) Empirical research on the insanity defense and attempted reforms: Evidence toward informed policy. <i>Law and Human Behavior</i> , 23(1), 117-136.
10/8/14	FMC Warden's Conference Rm (combined - trainees only)		Landmark Cases - Mental State Defenses Daniel McNaughten's Case, 8 Eng. Rep. 718 (1843) Durham v. U. S. 214 F.2d 862 (D.C. Cir., 1954) Frendak v. U.S., 408 A.2d 364 (1979) U.S. v. Brawner, 471 F. 2d 969 (D.C. Cir., 1972) Ibn-Tamas v. U.S., 407 A.2d 626 (1979) Montana v. Egelhoff, 116 S.Ct. 2013 (1996) Clark v. Arizona, 126 S. Ct. 2709 (2006)
10/15/14	FCC - Training Center (combined)	Angela Walden-Weaver, Ph.D.	Assessment of Dangerousness Singh, J.P., & Fazel, S (2010). Forensic risk assessment: A metareview. <i>Criminal Justice & Behavior</i> , 37, 965-988. Scott, C.L., & Resnick, P.J. (2006). Violence Risk Assessment in Persons with Mental Illness. <i>Aggression and Violent Behavior</i> , Volume 11 (6), p. 598-611.

DATE	LOCATION	Speaker(s)	SEMINAR TITLE & READINGS
10/22/14	FMC Warden's Conference Rm (combined - trainees only)		Landmark Cases - Protection of Third Parties Tarasoff v. Board of Regents of the Univ. of California, 17 Cal. 3d 415; 551 P. 2d 334, 131 Cal. Rptr. 14 (1976) Lipari v. Sears Roebuck, 497 F.Supp. 185 (1980) Jablonski v. U.S., 712 F. 2d 391 (9th Cir. 1983) Hedlund v. Sup. Court of Orange County, 669 P.2d. 41 (1983) Brady v. Hopper, 570 F.Supp. 1333 (1983) Naidu v. Laird, 539 A.2d 1064 (Del. 1988)
10/29/14	FCC – Training Center (combined)	Bob Cochrane, Psy.D., ABPP	Malingering, Deception and Dissimulation Rogers, R., & Bender, S. (2003). Evaluation of Malingering and Deception. (pp. 109-129). In A. Goldstein (Ed.) Handbook of psychology: Forensic psychology, Vol. 11. Assessment of malingering in correctional settings. Handbook of correctional mental health (2nd ed.). Vitacco, Michael J. ; Rogers, Richard Scott, Charles L. (Ed), (2010). Handbook of correctional mental health (2nd ed.), (pp. 255-276). Arlington, VA, US: American Psychiatric Publishing, Inc., xix, 626 pp. Slick, D.J., Sherman, E.M.S., & Iverson, G.L. (1999) Diagnostic criteria for malingered neurocognitive dysfunction: proposed standards for clinical practice and research. <i>The Clinical Neuropsychologist</i> , 13(4), 545-561.
11/5/14	FCC – Training Center (combined)	Bruce Berger, M.D. Michael Bredenberg, J.D.	Practitioner as an Expert Witness <i>Principles and Practice of Forensic Psychiatry</i> (Chapters 4 and 5) <i>Psychological Evaluations for the Courts</i> (Chapter 18)

DATE	LOCATION	Speaker(s)	SEMINAR TITLE & READINGS
11/12/14	FMC Warden's Conference Rm (combined - trainees only)		Landmark Cases - Expertise and Evidence Frye v. U.S., 295 F. 1013 (D.C. Cir. 1923) Jenkins v. U.S., 307 F.2d 637 (D.C. Cir. 1961) Daubert v. Merrell Dow Pharm., 113 S.Ct. 2786 (1993) General Electric Co. v. Joiner, 522 U.S. 136 (1997) Borawick v. Shay, 68 F.3d 597 (2 nd Cir. 1995) Kumho Tire v. Carmichael, 526 U.S. 137 (1999)
11/19/14	FCC – Training Center (combined)	Rhett Landis, Ph.D., ABPP	Forensic Report Writing Landis, E. Forensic Report Writing at FCC Butner. unpublished monograph. Grisso, T. (2010) Guidance for Improving Forensic Reports: A Review of Common Errors. Open Access Journal of Forensic Psychology, 2, 02-115. http://www.forensicpsychologyunbound.ws/ – 2010.2: 102-115)
11/26/14	FCC – Training Center (combined)	Tracy Pennuto, J.D., Ph.D.	Neuropsychological Assessment in Forensic Cases National Academy of Neuropsychology (2000). Presence of third party observers during neuropsychological testing: Official statement of the National Academy of Neuropsychology. Archives of Clinical Neuropsychology, 15 (5), 379-380. National Academy of Neuropsychology (2000). Test security: Official position statement of the National Academy of Neuropsychology. Archives of Clinical Neuropsychology, 15 (5), 383-386. Bush, S.S., et. al (2009). Secretive recording of neuropsychological testing and interviewing: Official Position of the National Academy of Neuropsychology. Archives of Clinical Neuropsychology, 24, 1-2.
12/3/14	FMC Warden's Conference Rm	Bob Cochrane, Psy.D., ABPP Michael Bredenberg, J.D.	Mock Testimony Demonstration (Voir Dire with Interns)

DATE	LOCATION	Speaker(s)	SEMINAR TITLE & READINGS
12/10/14	FMC Warden's Conference Rm (combined - trainees only)		Landmark Cases - Juvenile Law Kent v. U.S., 383 U.S. 541 (1966) In re Gault, 387 U.S. 1 (1967) Fare v. Michael C., 442 U.S. 707 (1979) Thompson v. Oklahoma, 487 U.S. 815 (1988) Stanford v. Kentucky., 492 U.S. 361 (1989) Roper v. Simmons 543 U.S. 551 (2005)
12/17/14	FCC – Training Center (combined)	Adeirdre Stribling Riley, Ph.D.	Right to Receive Treatment, Right to Refuse Treatment <i>Principles and Practice of Forensic Psychiatry</i> (Chapter 17), pp. 111 - 117. Drogin, E.Y. & Barrett, C.L. (2003). Substituted judgment: Roles for the forensic psychologist. In A. M. Goldstein (Ed.), <i>Forensic Psychology</i> (pp. 301-312). New York: Wiley Optional: Grisso, T. (2002). Competence to consent to treatment. In T. Grisso, <i>Evaluating competencies: Forensic assessments and instruments</i> . (pp.391-460). New York: Kluwer.
12/24/14			NO SEMINAR - Holiday
12/31/14			NO SEMINAR - Holiday

DATE	LOCATION	Speaker(s)	SEMINAR TITLE & READINGS
01/07/15	FMC Warden's Conference Rm (combined - trainees only)		Landmark Cases - Informed Consent Caesar v. Mountanos, 542 F. 2d 1064 (9 th Cir., 1976) Truman v. Thomas, 27 Cal.3d 285, 611 P.2d 902 (1980) Zinermon v. Burch, 494 U.S. 113 (1990) Rennie v. Klein 653 F.2d 836)3d Cir. 1981) Rogers v. Okin, 638 F. Supp 934 (D. Mass 1986) Cruzan v. Director, Missouri..., 497 U.S. 261 (1990)
01/14/15	CRH (combined)	LaVonne Fox, Psy.D.	Disability Determinations <i>Principles and Practice of Forensic Psychiatry</i> , Chapters 29 & 30 (pp 260 - 281) <i>Psychological Evaluations for the Courts</i> (Chapter 12)
01/21/15	FMC Warden's Conference Rm (combined - trainees only)		Landmark Cases - Employment/Disability, Worker's Comp, ADA Carter v. General Motors, 106 N.W. 2d. 105 (1961) Dillon v. Legg, 441 P.2d. 912 (1968) Gough v. Natural Gas Pipeline Co. of America, U.S.C.A., 5 th Cir. (1993) Bragdon v. Abbott, 118 S.Ct. 2196 (1998) Pennsylvania v. Yesky, 118 S.Ct. 1952 (1998) Olmstead et.al. v. L.C. by Zimring, 119 S.Ct. 2176 (1999)
01/28/15	FMC Warden's Conference Rm		Mock Testimony #1 (Intern, Attorney Jennifer Dannels)
02/04/15	CRH (combined)	Maureen Reardon, Ph.D., ABPP	Antisocial Personality Disorder: Forensic and Correctional Implications

DATE	LOCATION	Speaker(s)	SEMINAR TITLE & READINGS
02/11/15	FMC Warden's Conference Rm (combined - trainees only)		Landmark Cases - Quasi-Criminal Commitment Vitek v. Jones, 445 U.S. 480 (1980) Jones v. U.S., 463 U.S. 354 , 103 S.Ct. 3043 (1983) Washington v. Harper, 494 U.S. 210 (1990) Foucha v. Louisiana, 504 U.S. 71 (1992) Kansas v. Hendricks, 117 S.Ct. 2072 (1997) Sell v. U.S., 539 U.S. 166 (2003)
02/18/15	CRH (combined)	M. Hazelrigg, Ph.D., ABPP	Disposition of Quasi-Criminal Commitments (NGRI, Dangerousness, etc.) Monson, C.M., Gunnin, D.D., Fogel, M.H., & Kyle, L.L. (2001) Stopping (or slowing) the revolving door: factors related to NGRI acquitees' maintenance of a conditional release. <i>Law and Human Behavior</i> , 25(3), 257-268.
02/25/15	FMC Warden's Conference Rm		Mock Testimony #2 (Intern, Attorney Christina Kelley)
03/04/15	FMC Warden's Conference Rm	Jennifer Dannels, J.D.	Civil Rights Issues Smith JT, Civil Rights of the Mentally Ill and Psychiatric Liability, Chapter 7, <i>Medical Malpractice Psychiatric Care</i> , Medical Malpractice Series. McGraw-Hill. New York, NY
03/11/15	FMC- Radiology	Radiology Tech/Dr. Pennuto	Use of Neuroimaging in the Evaluation of Criminal Cases
03/18/15	FMC Warden's Conference Rm		Mock Testimony #3 (Intern, Attorney Michael Bredenberg)

DATE	LOCATION	Speaker(s)	SEMINAR TITLE & READINGS
03/25/15	FCC - Training Center (combined)	Christina Kelley, J.D.	Personal Injury and Tort Litigation <i>Principles and Practice of Forensic Psychiatry</i> (Chapters 32 & 33) Greenberg, S. (2003). Personal injury examinations in torts for emotional distress. In A. M. Goldstein (Ed.), <i>Forensic Psychology</i> (pp. 233-256). New York: Wiley
04/01/15	CRH (combined)	Michael Wydo, Psy.D., ABPP	Assessment & Diagnoses of Personality Disorders
04/08/15	FMC Warden's Conference Rm (combined - trainees only)		Landmark Cases - Civil Commitment O'Connor v. Donaldson, 422 U.S. 563 (1975) Youngberg v. Romeo, 457 U.S. 307 (1982) Wyatt v. Stickney, 334 F. Supp. 1341 (M.D. Ala. 1971), later proceeding 344 F. Supp. 387 (M.D. Ala. 1972), <u>aff'd/rev'd in part</u> Wyatt v. Aderholt, 503 F. 2d 1305 (5th Cir. 1974). Addington v. Texas, 441 U.S. 418 (1979) Parham v. J.R., 99 S.Ct. 2493 (1979) Heller v. Doe, 113 S.Ct. 2637 (1993) Lessard v. Schmidt, 349 F.Supp. 1078 (E.D. Wis. 1972)
04/15/15	CRH (combined)	Bob Cochrane, Psy.D., ABPP	Competency to Waive Miranda Rights <i>Psychological Evaluations for the Courts</i> (Chapter 7) Oberlander, O.B., Goldstein, N.E., & Goldstein, A.M. (2003). Competence to Confess (pp. 335-358). In A. Goldstein (Ed.) <i>Handbook of psychology: Forensic psychology, Vol. 11.</i>

DATE	LOCATION	Speaker(s)	SEMINAR TITLE & READINGS
04/22/15	FMC Warden's Conference Rm (combined - trainees only)		Landmark Cases - Child Custody Law DeShaney v. Winnebago County Department of Social Services, 489 U.S. 189 (1989) Lassiter v. Department of Social Services, 452 U.S. 18 (1981) Painter v. Bannister, 358 Iowa 1390, 140 N.W. 2d. 152 (1966) Pennsylvania v. Richie, 480 U.S. 39 (1987) Santosky v. Kramer, 455 U.S. 745 (1982) Troxel v. Granville, 530 U.S. 57 (2000)
04/29/15	CRH (combined)	Helen Brantley, Ph.D.	Children and Families/ Custody Evaluations
05/06/15	FMC Warden's Conference Rm (combined - trainees only)		Landmark Cases - Confidentiality and Privilege In re: Lifschutz, 2 Cal.3d 415, 467 P.2d 557 (1970) In re: subpoena on Zuniga, 714 F.2d 632 (6 th Cir. 1983) (cert. denied) State v. Andring, 342 N.W. 2d 128 (Minn. 1984) Commonwealth v. Kobrin, 395 Mass. 284 (1985) Jaffee v. Redmond, 135 L.Ed. 2d 337 (1996) Deatherage v. Washington, 932 P.2d 1267 (Wash. Ct. App. 1997)
05/13/15	FMC Warden's Conference Rm		Mock Testimony #4 (Intern, Attorney Michael Lockridge)
05/20/15	FCC - Training Center (combined)	Maureen Reardon, Ph.D., ABPP	Professional Ethics <i>American Psychological Association's Ethical Principles of Psychologists and Code of Conduct</i> <i>Specialty Guidelines for Forensic Psychologists</i> <i>Guidelines for Forensic Psychiatrists</i>

DATE	LOCATION	Speaker(s)	SEMINAR TITLE & READINGS
05/27/15	FCC - Training Center (combined)	Michael Lockridge, J.D.	Presentencing Evaluations <i>Psychological Evaluations for the Courts.</i> (Chapter 9)
06/3/15	FCC - Training Center (combined)	George Corvin, M.D.	Malpractice & Professional Liability <i>Principles and Practice of Forensic Psychiatry</i> , Ch. 28 (pp 249-259)
06/10/15	FMC Warden's Conference Rm		Mock Testimony #5 (Intern, Attorney Jennifer Dannels)
06/17/15	CRH (combined)	Nancy Laney, Ph.D.	Evaluating Persons w/ Intellectual and Developmental Disorder
06/24/15	FMC Warden's Conference Rm		Mock Testimony #6 (Intern, Attorney Michael Bredenberg)
07/1/14	FMC Warden's Conference Rm		Mock Testimony #7 (Intern, Attorney Christina Kelley)
07/8/15	CRH (combined)	Bill Burlington, J.D.	Guardianship & Testamentary Capacity **NOTE: Seminar time 9:00-10:30
07/15/15	FCC - Training Center (combined)	Adeirdre Stribling Riley, Ph.D.	FCC - PCL-R Use in Court <i>The Mask of Sanity, Hervey Cleckley, 1988</i>
07/22/15	FCC - Training Center (combined)	Tom Owens, M.D.	Sexual Offender Treatment – Pharmacological Interventions

DATE	LOCATION	Speaker(s)	SEMINAR TITLE & READINGS
07/29/15	FCC - Training Center (combined)	Maureen Reardon, Ph.D	<p>Death Penalty Issues</p> <p>Cunningham, M. & Goldstein, A. M. (2003). Sentencing determinations in death penalty cases. In A. M. Goldstein (Ed.), <i>Forensic Psychology</i> (pp. 407-436). New York: Wiley</p> <p>Heilbrun, K., Marczyk, G., & DeMatteo, D. (2002). Competence to be executed. In K. Heilbrun, G. Marczyk, and D. DeMatteo (Eds.) <i>Forensic mental health assessment: A casebook</i> (pp. 96-115). New York: Oxford.</p> <p><i>Psychological Evaluations for the Courts</i> (Chapters 9, pp. 285-293)</p>
08/5/15	FMC Warden's Conference Rm (combined - trainees only)		<p>Landmark Cases - Death Penalty</p> <p>Ford v. Wainwright, 477 U.S. 199 (1986)</p> <p>Ake v. Oklahoma, 470 U.S. 68 (1985)</p> <p>Barefoot v. Estelle, 463 U.S. 880 (1983)</p> <p>Atkins v. Virginia, 536 U.S. 304 (2002)</p> <p>Gregg v. Georgia, 428 U.S. 153 (1976)</p> <p>Panetti v. Quarterman, 549 U.S. 1106 (2007)</p>
08/12/15	FCC – Training Center (combined)	Rhett Landis, Ph.D., ABPP	<p>Privacy/Management of Client Information</p> <p>Stromberg, C., et.al. (1993). Privacy, confidentiality, & privilege. <i>Psychologist's Legal Updates</i>, #1, April 1993. Washington, D.C.: National Register of Health Service Providers in Psychology.</p> <p>Summary of the HIPPA Privacy Rule at www.hhs.gov/ocr/privacysummary.pdf</p>